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12/18/2003

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/986,267	11/08/2001	Minh Van Ngo	50432-204	5014

TITLE OF INVENTION: METHOD OF FORMING RELIABLE CU INTERCONNECTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEI	E PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	03/18/2004
EXAMINER		ART UNIT	T CLASS-SUBCLASS		
BROPHY, JAMIE LYNN		2822	438-622000		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  □ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front pagnames of up to 3 registered patent agents OR, alternatively, (2) the name firm (having as a member a registered agent) and the names of up to 2 registromeys or agents. If no name is list will be printed.	attorneys or 1e of a single d attorney or stered patent	

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ADVANCED MICRO DEVICES, INC.

Sunnyvale, California

Please check the appropriate assignee category or category	ories (will not be printed on the patent);	individual	Secorporation or other private group entity	☐ governm		
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):					
<b>♂</b> Issue Fee	☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.					
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Arthur J: Steiner, Reg. #26, 106

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